

**Statement for the Record by Rep. Ann McLane Kuster**  
**Before the House Energy & Commerce Committee**  
**October 11, 2017**

Thank you Mr. Chairman, Ranking Member, and distinguished Members of the Committee.

I appreciate your willingness to allow all Members of Congress to speak about the opioid epidemic, one of the worst public health crises in recent memory.

In fact, the Acting Director of the Office of National Drug Control Policy recently called the national opioid and heroin epidemic the worst drug crisis in this nation's history. This statement was confirmed by provisional data recently released by the Centers for Disease Control and Prevention – 2016 will be the worst year on record for this crisis. Over 60,000 people died due to drug overdose in 2016, up by about 20% from 2015. CDC now believes that fentanyl is the leading cause of drug overdose death in this country.

My home state of New Hampshire knows too well the impact of fentanyl. In 2015, New Hampshire was first in the nation for fentanyl deaths per capita. Synthetic opioids are cheap to acquire and incredibly potent. As you know, fentanyl is about 50 times more powerful than heroin.

As the founder and co-chair of the *Bipartisan Heroin Task Force*, I am here to ask the members of this Committee to take a look to our comprehensive legislative agenda that we released this summer to address the opioid. Our agenda contains common-sense, bipartisan legislation to address many facets of the opioid crisis. Included are five bills under the jurisdiction of the House Committee on Energy & Commerce:

1. Jessie's Law (H.R. 1554) would help doctors be better informed about the patients they are treating by ensuring doctors have access to the history of addiction for a consenting patient. The bill was named after a Michigan resident who sadly died due to an opioid-related overdose.
2. Road to Recovery Act (H.R. 2938) would improve access to greater resources for states to help their communities resolve this crisis. Specifically, this bill would eliminate the Medicaid Institutes for Mental Diseases (IMD) exclusion for substance use disorder. While this law had good intentions, it has negatively impacted access to inpatient treatment. I will note that the Road to Recovery Act was recently supported by dozens of Attorney Generals, including the New Hampshire AG.
3. Synthetic Drug Awareness Act (H.R. 449) would require the United States Surgeon General to provide Congress a report on the public health effects of synthetic drugs, like fentanyl, used by people aged 12 to 18.

4. CRIB Act (H.R. 2501) would establish residential pediatric care centers within Medicaid to treat infants with neonatal abstinence syndrome (NAS).
5. STOP OD Act (H.R. 664) would authorize \$75 million in annual grants for two years to improve education efforts to prevent opioid abuse and promote treatment. The bill would also provide \$150 million in annual grants for two years to improve access to naloxone and its administration, as well as improve testing for fentanyl.

Through the collaborative work of my Co-Chair Rep. Tom MacArthur, and our Vice Chairs Reps. Donald Norcross and Brian Fitzpatrick, we have increased the profile of this crisis and the strategies we will need to combat this public health emergency.

Thankfully, the private sector and the federal government have improved the response to this crisis. Innovative new treatments from companies like Smiths Medical and their peripheral nerve block technology offers hope for a future where we are less reliant on opioids to treat pain.

Notably, the National Institutes of Health has created the “Public-Private Initiative to Address the Opioid Crisis.” This group has directed the vast research resources of NIH to this crisis. And through it, they have developed new treatments for chronic pain and new techniques for treating opioid addiction. We must continue to support these public and private efforts.

The *Bipartisan Heroin Task Force* stands ready to assist you all in creating a comprehensive strategy to address this crisis.

Thank you again for the opportunity to testify before you all about this issue.

**Bipartisan Heroin Task Force's Legislative Agenda**  
**for the 115<sup>th</sup> Congress**

**JESSIE'S LAW**

H.R.1554

Sponsor: Rep. Tim Walberg (MI)

Cosponsors: 4

Co-Lead: Dingell

GOP: Jenkins (WV), Mooney

Dem: Swalwell

Committees: House Committee on Energy and Commerce

Status: Referred to the Subcommittee on Health

Related Bills: S.581

Description: A bill named after Michigan resident Jessie Grubb who tragically died of an opioid overdose last year. Jessie's Law would help ensure doctors have access to a consenting patient's prior history of addiction in order to make fully informed care and treatment decisions.

**STEM THE TIDE OF OVERDOSE PREVALENCE FROM OPIATE DRUGS**  
**(STOP OD) ACT**

H.R.664

Sponsor: Rep. David Joyce (OH)

Cosponsors: 32

Co-Lead: Ryan (OH)

GOP: Barr, Bost, Comstock, Donovan, Duncan, LaHood, Faso, Katko, Kelly (PA), Meehan, Renacci, Stefanik, Stivers, Turner

Dem: Blumenauer, Bonamici, Dingell, Evans, Kuster, Gabbard, Hastings, Jackson Lee, Jayapal, Kaptur, Khanna, Kilmer, Serrano, Slaughter, Soto, Wasserman Shultz

Committees: House Committees on Energy and Commerce, Judiciary, Oversight and Government Reform, and Armed Services

Status: Referred to Relevant Subcommittees

Related Bills: NA

Description:

1. This bill would authorize not more than \$75 million annually in grants for two years to expand educational efforts to prevent opiate abuse, promote treatment and recovery, and promote the understanding that addiction is a chronic disease
2. This bill would also authorize not more than \$150 million annually in grants for two years to provide access to Naloxone, training in the administration of the drug, and testing for Fentanyl.
  - a. This grant would be paid for in part by a fee of \$80, the same cost as one unit of Naloxone, attached to conviction for certain drug offenses (manufacture, distribution, and possession with the intent to distribute). This fee ensures the criminals enabling the supply and demand of the drug trade pay into mitigating the consequences of their actions. After two years, the funds collected go toward paying down the federal debt.
3. Pay For: This bill would extend data center consolidation efforts for two more years, generating about \$500 million in savings.

**ADDICTION RECOVERY THROUGH FAMILY  
HEALTH ACCOUNTS ACT**

H.R.1575

Sponsor: Rep. Tom MacArthur (NJ)

Cosponsors: 1

Co-Lead: Clark

Committees: House Committee on Ways and Means

Status: Referred to the Committee on Ways and Means

Related Bills: NA

Description: This legislation would give family members the option of using funds in their Health Savings Accounts, Flexible Spending Accounts, or similar accounts to pay for addiction treatment for any relative, even if they aren't a dependent. Currently, you are not permitted to use funds in your tax advantaged accounts to pay for a family member's rehab unless they are your spouse, dependent, or a dependent relative. This legislation will make sure any family member struggling with addiction can be helped by a relative with these tax advantaged funds.

# **ROAD TO RECOVERY ACT**

H.R.2938

Sponsor: Rep. Brian Fitzpatrick (PA)

Cosponsors: 15

Co-Lead: Murphy (FL)

GOP: Kelly (PA), Knight, MacArthur, Murphy (PA),  
Tenney

Dem: Boyle, Brady, Clark, Courtney, Foster, Kuster, S.  
Maloney, Norcross, Shea-Porter

Committees: House Committee on Energy and Commerce

Status: Referred to the Committee on Energy and Commerce

Related Bills: NA

Description: This bill would eliminate the Medicaid Institutions for Mental Diseases (IMD) exclusion for substance use disorder and help states expand access to inpatient treatment for Medicaid enrollees.

**INTERNATIONAL NARCOTICS TRAFFICKING**  
**EMERGENCY RESPONSE BY DETECTING INCOMING**  
**CONTRABAND WITH TECHNOLOGY (INTERDICT)**  
**ACT**  
H.R.2142

Sponsor: Rep. Niki Tsongas (MA)

Cosponsors: 4

Co-Lead: Fitzpatrick

GOP: Buchanan, Comstock

Dem: Ryan (OH)

Committees: House Committee on Homeland Security

Status: Referred to the Subcommittee on Border and Maritime Security

Related Bills: S.708

Description: Authorizes the appropriation of \$15 million for U.S. Customs and Border Protection (CBP) to fund new screening devices, laboratory equipment, facilities, and personnel for the latest in chemical screening devices and scientific support to detect and intercept fentanyl and other synthetic opioids.

# **SYNTHETIC DRUG AWARENESS ACT**

H.R.449

Sponsor: Rep. Hakeem Jeffries (NY)

Cosponsors: 19

Co-Lead: Gowdy, Butterfield, Collins (NY)

GOP: Allen, Bilirakis, Comstock, Cramer, Donovan, Joyce, King (NY), McKinley, Mullin, Olson, T. Rooney, Sensenbrenner, Stefanik, Thornberry

Dem: Kuster

Committees: House Committee on Energy and Commerce

Status: Referred to the Subcommittee on Health

Related Bills: NA

Description: This bill would require the United States Surgeon General to submit a report to Congress on the public health effects of the rise in synthetic drug use among young people aged 12 to 18.



# **CARING RECOVERY FOR INFANTS AND BABIES**

## **(CRIB) ACT**

H.R.2501

Sponsor: Rep. Evan Jenkins (WV)

Cosponsors: 6

Co-Lead: NA

GOP: McKinley, Poliquin, Tipton, Turner

Dem: Clark, Ryan (OH)

Committees: House Committee on Energy and Commerce

Status: Referred to the Subcommittee on Health

Related Bills: S.1148

Description: The bill would establish residential pediatric care centers within Medicaid to treat babies with neonatal abstinence syndrome (NAS) exposure to opioids during pregnancy. This legislation would establish a provider type for NAS treatment centers clearly defining residential pediatric recovery centers. This legislation also includes an emphasis on residential pediatric recovery centers offering counseling to the mothers and families to help build those important connections from birth.

# VA PRESCRIPTION DATA ACCOUNTABILITY ACT

H.R.1545

Sponsor: Rep. Ann McLane Kuster (NH)

Cosponsors: 11

Co-Lead: Wenstrup

GOP: Bergman, Costello, Poliquin, Walorski

Dem: Brownley, Esty, Peters, Sablan, Shea-Porter, Takano

Committees: House Committee on Veterans' Affairs

Status: **Passed the House**, Received in the Senate, and referred to the Committee on Veterans' Affairs

Related Bills: NA

Description: This bill would clarify current law to stipulate that the Veterans Health Administration (VHA) is required to disclose information to state-controlled substance monitoring programs for anyone – veteran or non-veteran – who is prescribed these medications through VA.

**U.S. DEPARTMENT OF VETERANS AFFAIRS**  
**PAIN CENTER OF EXCELLENCE**

Sponsor: Rep. Ann McLane Kuster (NH)

Cosponsors: 1

Dem: Norcross

Committees: House Committee on Veterans' Affairs

Status: Pending Draft

Related Bills: NA

Description: The bill would establish a new Center of Excellence for research into pain. The Center of Excellence would provide coordination across VA's existing and innovative research programs on reducing the use of opioids and improving alternative treatments to pain. The Center of Excellence would also conduct new research, especially in prescriber education regarding pain and substance use. The Center of Excellence is inspired in part by NIH's Pain Consortium which coordinates Pain related research across the institutes of NIH.

